O'DRISCOLL LAND SURVEYING, Co.

46 Cottage Street Medway, Massachusetts, 02053

Phone: 508-533-3314

Email: odlandsurvey@gmail.com

Millis Town Clerk Received

MAY 25 2022 D 10:00 cm

Town of Millis Planning Board Main Street Millis, MA

May 24, 2022

RE: Causeway Steet / Grove Street ANR Plan

Millis Planning Board

This letter is meant to act as written evidence that the plan submitted by this office dated March 28, 2022, on behalf of Carlo Molinari, meets the requirements for endorsement under Chapter 81-P.

Both lots shown have frontage on Causeway Street and Grove Street, public ways.

Both lots conform to the required frontage, area, width, and depth, required in the zoning by-laws for the Residential Town (R-T) zoning district.

Both lots also conform to the perimeter to area ratio required in the zoning by-laws.

Please feel free to contact me if you have any questions.

Daniel A. O'Driscoll

Professional Land Surveyor

David A. O'Driver

Certified Soil Evaluator

Form A

Application for Endorsement Of Plan Believed not to Require Approval

Millis Town Clerk Received

MAY 25 2022 20 10:00 au

File one completed form with the Planning Board and one copy with the Town Clerk in accordance with the requirements of Section 3.1., at least 24 hours before a regularly scheduled meeting of the Planning Board.

To the Planning Board: Millis, Massachusetts, MAY 5 2022	
The undersigned, believing that the accompanying plan of his property, in the Town of Millis, does not constitute a subdivision within the meaning of the Subdivision Control Law, herewith submits said plan for a determination and endorsement that Planning Board approval, under the Subdivision Control Law, is not required.	
1. Name of Applicant CARLO MOLINIARI TIL CAN Signature Signature	
Address 6 CAUSEYWAY ST. MICUS MA 02054 2. Name of Owner CARLO MOLINARI, TII Cuffer Signature Signature	
Address 6 CAUSEWAY ST. MILLIS MA 02054	
3. Name of Engineer or Surveyor O'DRISCOLL CAND SURVEYING, INC. DANIEL A. O'DRISCOLL Address 46 COTTAGE ST. MEDINAY MA 07053	
4. Deed of property recorded in NORFOCK COUNTY Registry,	
Book 21036 Page 23	
5. Location and Description of Property, including assessor's map & parcel number:	
ASSES. MAP 13 PARCEL OOI 25.7 ± ACRES LO ON CHUSEWAY ST. AM GROVE ST.	ID ON
Date of Submission	
Town Clerk	
Signature	

Interdepartmental Sign-Off Form

Board of Health: Regulations regarding Sub-surface Sewage Disposal and the division of land, under review of the Millis Planning Board, to be completed by the applicant.

Millis Town Clerk Received

Planning Board, to be completed by the applicant. MAY 25 2022 No.000 and
SUB-DIVISION of LAND IN UNSEWERED AREAS: All real property that is sub-divided must meet the requirements of the State Code, 310 CMR 15.010. The property owner must prove that the remainder property, if served by a septic sixten, consupport necessary maintenance and a subsequent fully-complying Title 5 system if the original system should fail. At the time of land division, the Board of Health may request percolation or soil testing and any other engineering necessary, with all expenses borne by the applicant, to prove that the remainder property can support a fully complying septic system.
Applicant's Name: CARW MOUNER! THE Mailing Address: 4 CAUGURY ST.
Sitt Address: (2 Co) (1564) NU CT
Engineer or Surveyor of record: O'DEISCOU (ALCO SURVEYLLE LAKE
Engineer or Surveyor of record: O'DRISCOUL LAND SURVEYING. INC. DANIEL A. O'DRISCOUL
Prior to sub-division or ANR division: Total Acreage = 25.7 AC.
Divided properties = 4,4/k, SB/Acres each Lot identified and the state of the state
Divided properties = 2/3 AC 8F/Acres each Divided properties = SF/Acres each Lot identified as: Cot 2
Divided properties = SF/Acres each Lot identified as:
SF/Acres each Lot identified as: Attach additional sheets, if necessary
Property is on municipal sewer, OR
Property is on septic system
Existing Septic is permitted for 4 bedrooms or gallons, AND
Yes/No Property is located in Nitrogen-Sensitive Area.
Signature of Applicant: Date: 5/5/22
Data of Diamaina Day 1 Page 1
Date of Planning Board Review:
Date of Planning Board Review: For Board of Health Office Use:
For Board of Health Office Use:
For Board of Health Office Use: Date Received: By:
For Board of Health Office Use: Date Received: By:
For Board of Health Office Use: Date Received: By: Approved without further conditions, date: By:
For Board of Health Office Use: Date Received: By:
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For Board of Health Office Use: Date Received: By: Approved without further conditions, date: By:
For Board of Health Office Use: Date Received: By: Approved without further conditions, date: By: Additional Information required: Perc testing required on Remainder property:
For Board of Health Office Use: Date Received: By: Approved without further conditions, date: By: Additional Information required:
For Board of Health Office Use: Date Received: Date Reviewed: By: Approved without further conditions, date: By: Additional Information required: Perc testing required on Remainder property: Engineering required for Remainder property:
For Board of Health Office Use: Date Received: By: Approved without further conditions, date: By: Additional Information required: Perc testing required on Remainder property:

